

Please type a plus sign (+) inside this box

MAY 26 1999

PTO/SB/08A (10-96)

Approved for use through 10/31/99. OMB 0651-0031
GSA FPMR (41 CFR) 101-11, Subpart G

PATENT AND TRADEMARK OFFICE: U.S. DEPARTMENT OF COMMERCE
Collection of information unless it contains a valid OMB control number.

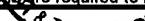
Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Substitute for form 1449A/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

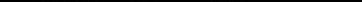
(use as many sheets as necessary)

Sheet 1 of 2

<p>Substitute for form 1449A/PTO</p> <p>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</p> <p>(use as many sheets as necessary)</p>				 <p>Complete if Known</p> <table border="1"> <tr> <td>Application Number</td> <td>09/208,884</td> </tr> <tr> <td>Filing Date</td> <td>12/10/98</td> </tr> <tr> <td>First Named Inventor</td> <td>Dal Santo</td> </tr> <tr> <td>Group Art Unit</td> <td>3737</td> </tr> <tr> <td>Examiner Name</td> <td>Manuel, G.</td> </tr> <tr> <td>Attorney Docket Number</td> <td></td> </tr> </table>		Application Number	09/208,884	Filing Date	12/10/98	First Named Inventor	Dal Santo	Group Art Unit	3737	Examiner Name	Manuel, G.	Attorney Docket Number	
Application Number	09/208,884																
Filing Date	12/10/98																
First Named Inventor	Dal Santo																
Group Art Unit	3737																
Examiner Name	Manuel, G.																
Attorney Docket Number																	
Sheet	1	of	2														

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature		Date Considered	8/12/99
-----------------------	---	--------------------	---------

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² See attached Kinds of U.S. Patent Documents. ³ Enter Office that issued the document, by the two-letter code (MPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231.
DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box →

MAY 26 1999

PTO/SB/08B (10-96)

Approved for use through 10/31/99. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
collection of information unless it contains a valid OMB control number.

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Shee

2

1

2

Complete if Known

Application Number	09/208,884
Filing Date	12/10/98
First Named Inventor	Dal Santo
Group Art Unit	3737
Examiner Name	Manuel, G.
Attorney Docket Number	

OTHER PRIOR ART – NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T2
<i>M</i>	12	FAIRVILLE MEDICAL OPTICS, INC., 2-page product information literature on "Pupilscan II", Type 12	

**Examiner
Signature**

G. Ward

Date
Considered

8/12/99

***EXAMINER:** Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Unique citation designation number. ² Applicant is to place a check mark here if English language Translation is attached.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231.
DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.